

# **A Temporary Milk-Free Diet for Breastfeeding Women**



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This paper was designed primarily for breast-feeding women whose physicians think that milk protein intolerance may be a factor in a breast-fed baby's gastrointestinal difficulties. It is intended to be a temporary diet for testing this idea.

It is not useful for infants suspected of having "lactose intolerance" because mother's milk contains lactose naturally and not in response to lactose in her diet. For this reason, to avoid unnecessary dietary restriction it is always wise to clarify that the reason for the mother's temporary milk-free diet involves milk protein (or other) issues, and not infant intolerance of the milk sugar lactose.

## **Where is cow's milk found in food?**

**All dairy products are the major sources of milk protein, of course.**

This includes any kind of cow's milk (skim, 2%, whole, chocolate, etc.) any kind of cheese, yogurt, cream, ice cream, most puddings and cream soups.

**Less obvious sources of milk protein are foods that have milk products as an ingredient.**

### **Words on labels that indicate that it may contain milk:**

acidophilus milk	cream	creamed anything	milk (any kind)
butter	dairy	milk chocolate	buttermilk
dry milk solids	pudding	whipping cream	cream soups
yogurt	ice cream	sherbet	ice milk
sour cream	casein	caseinate	lactose
whey	cheese		
margarines with milk solids or "a touch of butter"			
buttermilk salad dressings (like ranch dressing)			

**Read labels for all commercial products or ask the manufacturer.**

**Watch for:** Many crackers, cookies, cakes, muffins, biscuits and frostings are made with margarine or butter. Most white bread is made with milk. (French bread and whole wheat breads are usually not, but check the labels. Sometimes the tops are brushed with butter.) Pancakes, waffles, and French toast made from mixes or commercially prepared. (If made from scratch with soy milk, rice milk, almond milk or water instead of milk, they are fine.) Instant mashed potatoes or potato dishes made with milk.

**These suspicious-looking words on labels actually are unrelated to milk, so they are fine.**

lactalbumin

lactate

lactic acid

Although it can feel overwhelming to think about all the foods like breads and crackers that might have milk in them, **remember that you really only have to know the names of one or two brands that are milk-free.**

It doesn't matter what any other products out there may contain milk if you only buy the one brand that you have looked at carefully and that you know is milk-free.

## Other Nutrition Issues

**While you are following a milk-free diet, it is important to replace the nutrients the milk would have provided.** For breast-feeding mothers this is very important because certain vitamins in her milk will depend on the adequacy of the mother's intake.

This is not true for all nutrients, but it is certainly true for B vitamins and vitamin C. Additionally, a new mother's body needs to recover from pregnancy and handle the work of making milk, so assuring an adequate intake of all nutrients is very important for her health as well.

A reasonable approach would be to **start with a standard daily "complete type" multivitamin with minerals.** A generic product is just fine.. Most have 200 mg calcium and 400 iu of vitamin D, plus the vitamin C and B vitamins.

**You can use up your prenatal vitamins after pregnancy, but note that many prenatal vitamins can be surprisingly low in many nutrients.** So take a look at the product you are using. Some brands are like a standard multivitamin with minerals plus some extra folic acid and a higher amount of iron than a non-prenatal product. This kind is just fine, but if your prenatal product does not contain at least **"regular" levels of zinc, iodine, magnesium and other nutrients** a different product can be very helpful. For example, get a generic or store-brand "multivitamin with minerals" product that says on the label or sign that says something like "Compare with Centrum" or "Compare with One-a-Day Complete."

Add a **calcium supplement** to provide 1000-1500 mg calcium. Any kind is fine. It can have vitamin D in it or not, because the vitamin D does not have to be in the pill with the calcium. It's the vitamin D already in your body that "pulls in" the calcium as it passes by. **Take the calcium at a different time from the multivitamin.**

**Vitamin D** needs special attention. You should have at least 2000 iu of **vitamin D** daily. Some people need more. (See my "Top Five Recommendations" paper for more information about this.) If you have 400 iu from the multivitamin, you can very safely and easily add a tiny and inexpensive 1000 iu or 2000 iu vitamin D capsule. Some people have low vitamin D stores (e.g. <30 mg/dL in their blood) so they need more. In that circumstance, tiny and inexpensive 5,000 iu capsules are also available over the counter as well.

This is generous but 2000-5000 iu is now recognized as being nowhere near too high a dose ... in fact, this level of intake is now regarded as a very good idea for many people, including pregnant and breastfeeding women. The best thing to do is to get your blood level of vitamin D (25-hydroxyvitamin D) measured to see if you are looking for a maintenance amount or a vitamin D deficiency replacement amount. But even if you choose not get a blood level checked, at least 2000 iu of vitamin D is very safe and a very good idea.

**Dairy products are also very good sources of protein, so your diet needs to include enough to make up for that as well.**

An ounce of **meat** or one **egg** has about the same protein as an ounce of cheese (1 slice) or a cup of milk (about 7-8 g of protein.) For a mental image of this amount, think of 3 oz of meat as the size of a deck of cards. It is very easy to make up for the dairy protein if you eat meat or eggs.

However, other generous sources of protein include **legumes (dried beans like chili beans, baked beans, etc. and peanuts) and all tree nuts (e.g. walnut, almond, pecan, cashews, etc.)** Two tablespoons of peanut butter provides the protein of a cup of milk. An ounce of any nuts, or  $\frac{3}{4}$  cup of cooked beans will also provide that amount.

**Soy beverages** like “Eden Soy” or “Silk” provide the same protein as milk, and also provide similar nutrition to milk, oz per oz. (About 100 iu of vitamin D and 300 mg calcium per cup.) **However, some milk-replacement products (like almond milk or rice milk or flax milk) have much less protein.** The range is from 0 to 4 grams of protein per cup.

The word “milk” in this context should be thought of as meaning “white and liquid” but not necessarily as being milk-like in terms of expected protein. There is no problem using these products as long as you also eat a good amount of the protein-rich foods as described above. But if you are counting on those “milks” to meet your protein needs, you will need to add more of some of the other items listed.

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This quick description is intended to be only a **temporary** diet to help to evaluate the cow’s milk protein tolerance of a breast-fed baby. This cow’s milk protein intolerance is possible because some intact cow’s milk protein has been found to find its way into the milk of some women. This is not a problem unless the baby happens to be intolerant of cow’s milk protein.

**If the baby’s digestive symptoms remain unchanged while mother has been on a carefully milk-free diet for two weeks or so, it is unlikely that the cow’s milk in her diet was the culprit.** In that case, a normal diet for a breastfeeding mother should be resumed and other causes of any gastrointestinal distress in the baby would be evaluated.